Image# 12971413047 PAGE 1 / 44

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

	For Other Than An Aut	monzea Committee	Office Use Only
NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, type over the lines.	12FE4M5
American Society of P	Plastic Surgeons PLAS	STYPAC	
ADDRESS (number and street)	20 F Street NW		
Check if different	#310A		
than previously reported. (ACC)	Washington		DC 20001 -
2. FEC IDENTIFICATION N	UMBER ▼ C⊓	ГУ▲	STATE ▲ ZIP CODE ▲
C C00249342		S THIS NEW (N) OF	AMENDED (A)
4. TYPE OF REPORT (Choose One)	Report Due On:	20 (M2) May 20 (M	(Non-Election Year Only)
(a) Quarterly Reports:		20 (M4) Jul 20 (M7	(Non-Election Year Only)
April 15 Quarterly Report (01)		
X July 15 Quarterly Report (0	PRE-Election	Primary (12P)	General (12G) Runoff (12R)
October 15 Quarterly Report (6	Report for the:	Convention (12C)	Special (12S)
January 31 Year-End Report (YE) Election	on on	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	POST-Election Report for the:	General (30G)	Runoff (30R) Special (30S)
Termination Report (TER)	t Electio	on on	in the State of
5. Covering Period 0.		through 06	M / D D / Y Y Y Y Y Y X Y X Y X Y X Y X Y X Y X
I certify that I have examined the	his Report and to the best of	f my knowledge and belief it is	true, correct and complete.
Type or Print Name of Treasure	er Mr. William Seward		
Signature of Treasurer Mr.	William Seward	[Electronically Filed]	Date 07 / 13 / 2012
NOTE: Submission of false, error	neous, or incomplete informatio	n may subject the person signing	this Report to the penalties of 2 U.S.C. §437g.
Office Use			FEC FORM 3X Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2

Write or Type Committee Name

American Society of Plastic Surgeons PLASTYPAC

2012 06 30 2012 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 82020.03 January 1, 2012 (b) Cash on Hand at 100460.77 Beginning of Reporting Period..... 92692.83 45650.00 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 146110.77 174712.86 6(a) and 6(c) for Column B)..... 60073.25 88675.34 Total Disbursements (from Line 31)...... Cash on Hand at Close of 8. Reporting Period 86037.52 86037.52 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D)

×

 Debts and Obligations Owed BY the Committee (Itemize all on

Schedule C and/or Schedule D)

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

0.00

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Society of Plastic Surgeons PLASTYPAC

I. Receipts	COLUMN B Calendar Year-to-Date				
•					
	40765.00	78287.00			
(i) Itemized (use Schedule A)	10100.00				
(ii) Unitemized	4885.00	14405.83			
Lines 11(a)(i) and (ii)	45650.00	92692.83			
,	0.00	0.00			
(such as PACs)	0.00	0.00			
Totals to Line 33, page 5)▶	45650.00	92692.83			
	0.00	0.00			
Il Loans Received	0.00	0.00			
oan Repayments Received	0.00	0.00			
offsets To Operating Expenditures					
Refunds, Rebates, etc.)					
Carry Totals to Line 37, page 5)	0.00	0.00			
efunds of Contributions Made	, , , , , , , , , , , , , , , , , , , ,	,,			
Federal Candidates and Other					
olitical Committees	0.00	0.00			
The state of the s					
· · · · · · · · · · · · · · · · · · ·	0.00	0.00			
	,	,			
·					
(from Schedule H3)	0.00	0.00			
o) Levin Funds (from Schedule H5)	0.00	0.00			
	Contributions (other than loans) From: a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)	Contributions (other than loans) From: a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A)			

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

COLUMN B Calendar Year-to-Date	COLUMN A Total This Period	II. Disbursements
ימוכוועמו וכמו־נט־טמנכ	Total Tillo I Gliou	Operating Expenditures:
		(a) Allocated Federal/Non-Federal Activity (from Schedule H4)
0.00	0.00	(i) Federal Share
0.00		
0.00	0.00	(ii) Non-Federal Share
1664.51	1062.42	(b) Other Federal Operating
1004.31	1002.42	Expenditures(c) Total Operating Expenditures
1664.51	1062.42	(add 21(a)(i), (a)(ii), and (b))▶
7 1 7 1 7		Transfers to Affiliated/Other Party
0.00	0.00	Committees
	5000000	Contributions to Federal Candidates/Committees
87000.00	59000.00	and Other Political Committees
0.00	0.00	Independent Expenditures
7	7 7 7	(use Schedule E)
0.00	0.00	(2 U.S.C. §441a(d)) (use Schedule F)
		, , ,
0.00	0.00	Loan Repayments Made
0.00	0.00	Loans Made Refunds of Contributions To:
10.83	40.00	(a) Individuals/Persons Other
10.00	10.83	Than Political Committees
0.00	0.00	(b) Political Party Committees
		(c) Other Political Committees
0.00	0.00	(such as PACs)
	, , , , , , , , , , , , , , , , , , , ,	
40.02	10.83	(d) Total Contribution Refunds
10.83	10.00	(add Lines 28(a), (b), and (c))▶
0.00	0.00	Other Disbursements
0.00	0.00	Other Dispursements
		Federal Election Activity (2 U.S.C. §431(20))
		(a) Allocated Federal Election Activity
0.00		(from Schedule H6)
0.00	0.00	(i) Federal Share
0.00	0.00	(ii) III aviirii Chara
7 7	3.00	(ii) "Levin" Share(b) Federal Election Activity Paid Entirely
0.00	0.00	With Federal Funds
7		(c) Total Federal Election Activity (add
0.00	0.00	Lines 30(a)(i), 30(a)(ii) and 30(b))▶
	 	Total Disbursements (add Lines 21(c), 22,
88675.34	60073.25	23, 24, 25, 26, 27, 28(d), 29 and 30(c))
		Total Fodoral Dishuraamanta
88675.34	60073.25	
	60073.25	23, 24, 25, 26, 27, 28(d), 29 and 30(c)) Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	45650.00	92692.83
4. Total Contribution Refunds (from Line 28(d))	10.83	10.83
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	45639.17	92682.00
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	1062.42	1664.51
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
3. Net Operating Expenditures (subtract Line 37 from Line 36)	1062.42	1664.51

Use separate schedule(s) for each category of the Detailed Summary Page

FOR	LINE	NU	MBER	:	PAGE		6	OF		44
(check only one)										
×	11a		11b		11c		12	!		
	13		14		15		16	;		17

	he name and address of any political committee t	
NAME OF COMMITTEE (In Full)		
American Society of Plastic Su	urgeons PLASTYPAC	
Full Name (Last, First, Middle Initial) A. M. Hugh Bailey MD FACS		Date of Receipt
Mailing Address 351 Hospital Rd		M = M / D = D / Y = Y = Y
Ste 617	State Zip Code	05 18 2012
City Newport Beach	CA 92663-3508	Transaction ID: E079EF1A24E9E0311B0 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period
Name of Employer Self	Occupation Physician	-
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 300.00	
Full Name (Last, First, Middle Initial)		
3. Michael Andrew Bogdan MD FAC	S	Date of Receipt
Mailing Address 410 N Carroll Ave Ste 170		M = M / D = D / Y = Y = Y = Y
City	State Zip Code	06 22 2012 Transaction ID: 808456BA-3ACA-437A-
Southlake	TX 76092-6455	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	365.00
Name of Employer	Occupation	1
Michael A Bogdan, MD, PLLC	Physician	4
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial) C. Steven C. Bonawitz MD		Date of Receipt
Mailing Address Johns Hopkins Outpatient C		05 17 2012
Department of Plastic and F	State Zip Code	Transaction ID : 2EFADB00-3443-4B1D-
Baltimore	MD 21287-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	1
Self	Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)	>	1665.00
or resolute that age (optional).		
TOTAL This Period (last page this line number	er only)	

SCHEDULE A (FEC Form 3X) IT

FOR LINE NUMBER: PAGE 7 OF

EMIZED RECEIPTS	for each category of the Detailed Summary Page	`	ck only 11a 13	one) 11b 14	11c		12 16	17
ny information copied from such Reports and Statements may	, , , ,					_		

NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) Keith E. Brandt MD Date of Receipt Mailing Address 660 S Euclid Ave Box 8238, 1150 Northwest Tower 04 04 2012 City Zip Code State Transaction ID: A16A8419-28CE-4FF0-MO Saint Louis 63110-1010 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Div. of Plastic & Reconstructi Surgery William G. Hamm Prof Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Glen S. Brooks MD Date of Receipt Mailing Address 776 Longmeadow St 06 15 2012 City State Zip Code Transaction ID: EC754F0E9FBA5417672 MA Longmeadow 01106-2219 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Karen M. Buckley MD Date of Receipt Mailing Address 517 Moye Blvd 06 26 2012 **Ecu Plastic Surgery** City Zip Code State Transaction ID: 251DB4079F0524B5313 NC Greenville 27834-2849 Amount of Each Receipt this Period FEC ID number of contributing C 365.00 federal political committee. Name of Employer Occupation Physician Self Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify)

SUBTOTAL of Receipts This Page (optional)		Ξ	7	I	Ξ	7	I	1′	15.0	0	
TOTAL This Period (last page this line number only)		_	7	_		7	_	Ξ		_	

Use separate schedule(s) for each category of the Detailed Summary Page

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	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full)	·	
American Society of Plastic Su	rgeons PLASTYPAC	
Full Name (Last, First, Middle Initial) Guy Cappuccino MD		Date of Receipt
Mailing Address 1001 Twin Arch Rd Ste 3A		04 20 2012
City	State Zip Code	Transaction ID : B1A1AFA9A45C79DA64A
Mount Airy	MD 21771-4130	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	1
Self	Physician	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General	00 0	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Robert John Carpenter MD		Date of Receipt
Mailing Address 217 Glenn St		M = M / D = D / Y = Y = Y
Ste 300	State Zin Code	05 23 2012
Cumberland	State Zip Code MD 21502-2590	Transaction ID : 75B4F51713288F7BBFE
Cumberland	MD 21502-2590	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	400.00
Name of Employer	Occupation	
Self	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	400.00	
Full Name (Last, First, Middle Initial) C. Kevin C. Chung MD		Date of Receipt
Mailing Address 1500 E Medical Center Dr		M = M / D = D / Y = Y = Y
2130 Taubman Center Space		04 17 2012
City	State Zip Code	Transaction ID: E7353198-95CA-4DB2-
Ann Arbor	MI 48109-5000	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	1
Self	Professor	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General		
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		1150.00
TOTAL This Period (last page this line number	only)	

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		atements may not be sold or used by any personame and address of any political committee to	
	OF COMMITTEE (In Full)	and an arrangement of the second seco	22 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
	can Society of Plastic Sur	geons PLASTYPAC	
<u>/ </u>			
	ne (Last, First, Middle Initial) t A. Cooper MD		Date of Receipt
Mailing A	Address 77 N Centre Ave		M M / D D / Y Y Y Y
	Ste 306		05 30 2012
City		Transaction ID: 69452FDD-6845-40BA-	
Rockville	e Centre	NY 11570-3923	Amount of Each Receipt this Period
	number of contributing olitical committee.	C	300.00
Name of	Employer	Occupation	
Self		Physician	
Receipt	For:	Aggregate Year-to-Date ▼	
Pri	mary General	riggiogato Total to Bato V	
Otl	ner (specify) ▼	300.00	
	ne (Last, First, Middle Initial) J. Cusenz MD		Date of Receipt
Mailing A	Address 1630 Maple Rd		M = M / D = D / Y = Y = Y
	Ste 200		04 13 2012
City		State Zip Code	Transaction ID: 85732ECFAC384524B5E
Williams	ville	NY 14221-3706	Amount of Each Receipt this Period
	number of contributing olitical committee.	C	500.00
Name of	Employer	Occupation	electronic check-bill payment
Self	. ,	Physician	
Receipt	For:	Aggregate Year-to-Date ▼	
	mary General	Aggregate rear-to-Date ▼	
	ner (specify) ▼	500.00	
	ne (Last, First, Middle Initial) rd A. De Ramon MD		Date of Receipt
Mailing A	Address 2025 Technology Pkwy Ste 303		05 30 _ 2012 _
City		State Zip Code	Transaction ID : 9DB6470C930E2F59D53
Mechan	icsburg	PA 17050-9402	Amount of Each Receipt this Period
	number of contributing olitical committee.	C	500.00
Name of	Employer	Occupation	
Self		Physician	
Receipt		Aggregate Year-to-Date ▼	
	mary ☐ General ner (specify) ▼	500.00	
SUBTOTA	L of Receipts This Page (optional)	<u> </u>	1300.00
TOTAL Th	is Period (last page this line number of	only)	

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) for each category of the X 11a 11b 12 11c Detailed Summary Page

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) Barry E. DiBernardo MD Date of Receipt Mailing Address 29 Park St 2012 City Zip Code State Transaction ID: 8D591B4A-9D9C-42FB-Montclair NJ 07042-3407 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Donald M. Ditmars MD Date of Receipt Mailing Address 2799 W Grand Blvd Plastic Surgery Clinic 04 06 2012 City State Zip Code Transaction ID: EE8F09F7DD61161AE7F MI Detroit 48202-2608 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Mark A. Eberbach MD Date of Receipt Mailing Address 14012 US Highway 19 26 2012 City Zip Code State Transaction ID: AAD95CE2FDB3010C830 FL Hudson 34667-1165 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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I TOTT LINE HOMBET						PAGE	. 1	11	OF	44
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		13		14		15		16		17

or for commercial purposes, other than using	the name and address of any political committee				
NAME OF COMMITTEE (In Full) American Society of Plastic S	Surgeons PLASTYPAC				
Full Name (Last, First, Middle Initial) Deborah K. Ekstrom MD Mailing Address 30 Seliabura St	Deborah K. Ekstrom MD				
Mailing Address 39 Salisbury St		06 06 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
City	State Zip Code MA 01609-3160	Transaction ID: 93625C5B-5D70-401B-			
Worcester	IVIA 01609-3160	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	365.00			
Name of Employer	Occupation				
Salisbury Plastic Surgery	Physician				
Receipt For: Primary General	Aggregate Year-to-Date ▼				
Other (specify) ▼	365.00				
Full Name (Last, First, Middle Initial) Michael A. Epstein MD		Date of Receipt			
Mailing Address 1535 Lake Cook Rd		M M / D D / Y Y Y Y			
Ste 211 City	State Zip Code	06 15 2012 Transaction ID : B0DD0281E285493C5C3			
Northbrook	IL 60062-1451	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	С	500.00			
Name of Employer	Occupation				
Self	Physician				
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00				
Full Name (Last, First, Middle Initial) C. Gregory R.D. Evans MD, FACS	S	Date of Receipt			
Mailing Address 200 S Manchester Ave Ste 650		04 13 2012			
City	State Zip Code CA 92868-3224	Transaction ID : 5EEF7A449AFDA3E6420			
Orange	CA 92868-3224	Amount of Each Receipt this Period			
FEC ID number of contributing federal political committee.	C	250.00			
Name of Employer	Occupation				
University of California Irvine	Physician				
Receipt For: Primary General	Aggregate Year-to-Date ▼				
Other (specify) ▼	250.00				
SUBTOTAL of Receipts This Page (optional	l) >	1115.00			
TOTAL This Period (last page this line num	her only)				

FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) for each category of the Detailed Summary Page

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	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Society of Plastic Su	rgeons PLASTYPAC	
Full Name (Last, First, Middle Initial) Lu-Jean Feng MD Mailing Address 31200 Pinetree Rd the Lu-Jean Feng Clinic City Pepper Pike FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary General Other (specify)	State Zip Code OH 44124-5928 C Occupation Physician Aggregate Year-to-Date ▼ 500.00	Date of Receipt 06 06 2012 Transaction ID: FF94C5F4-8406-48CB- Amount of Each Receipt this Period 500.00
Full Name (Last, First, Middle Initial) William C. Franckle MD Mailing Address 2301 E Evesham Rd Ste 107 City Voorhees FEC ID number of contributing federal political committee. Name of Employer The Pavilion Voorhees Receipt For: Primary General Other (specify)	State Zip Code NJ 08043-4502 C Occupation Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt 06 06 2012 Transaction ID: 98C5E74C-67F0-4654- Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) John E. Gatti MD Mailing Address 409 Kings Hwy S City Cherry Hill FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary Other (specify) General Other (specify)	State Zip Code NJ 08034-2512 C Occupation Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt 06 22 2012 Transaction ID: 106915035BD422DBC0F Amount of Each Receipt this Period 250.00
SUBTOTAL of Receipts This Page (optional)	>	1000.00
TOTAL This Period (last page this line number	only)	

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13 OF Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) Lloyd B. Gayle MD Date of Receipt Mailing Address 4th Floor 2012 City Zip Code State Transaction ID: FB50238926389145AE1 NY New York 10021 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Center For Specialty Care Associate Professor Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) B. Scot Bradley Glasberg MD Date of Receipt Mailing Address 42A E 74th St 06 25 2012 City State Zip Code Transaction ID: 53288346-BF08-4F85-NY New York 10021-2735 Amount of Each Receipt this Period FEC ID number of contributing 1080.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1080.00 Other (specify) Full Name (Last, First, Middle Initial) c. Scott A. Greenberg MD Date of Receipt Mailing Address 1925 Mizell Ave 20 04 2012 Ste 303 City State Zip Code Transaction ID: 3698B9117DC543DE4F7 FL Winter Park 32792-4155 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1830.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) IT

FOR LINE NUMBER: PAGE

14 OF

EMIZED RECEIPTS	for each category of the Detailed Summary Page	`	ck only 11a 13	_ `) 1b [4	11c 15	12 16	17
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A or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) Geoffrey C. Gurtner MD Date of Receipt Mailing Address Gk-201 257 Campus Driver West 2012 24 City Zip Code State Transaction ID: E6DDF1DA-3B89-421A Stanford CA 94305 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Stanford University Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Phillip C. Haeck MD Date of Receipt Mailing Address 901 Boren Ave Ste 1650 05 09 2012 City State Zip Code Transaction ID: D89C71CC876F2CAEDCD WA Seattle 98104-3508 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) c. Stephen U. Harris MD Date of Receipt Mailing Address 500 Montauk Hwy 2012 05 18 Ste H City State Zip Code Transaction ID: 8D55DC82-1BD2-48CB-NY West Islip 11795-4419 Amount of Each Receipt this Period FEC ID number of contributing 2000.00 С federal political committee. Name of Employer Occupation Harris Plastic Surgery Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 2000.00 Other (specify) 4000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

	FOR LINE	NUMBER:	: PAGE	E 15 OF	44
Use separate schedule(s)	(check only	one)			
for each category of the Detailed Summary Page	X 11a	11b	11c	12	
	13	14	15	16	17

or for commercial purposes, other than using the	Statements may not be sold or used by any pers e name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Society of Plastic Sul	rgeons PLASTYPAC	
Full Name (Last, First, Middle Initial) John B. Hijjawi MD Mailing Address 8700 W Watertown Plank Rd City Milwaukee FEC ID number of contributing federal political committee. Name of Employer Medical College of Wisconsin Receipt For: Primary General Other (specify)	State Zip Code WI 53226-3595 C Occupation Physician Aggregate Year-to-Date ▼ 600.00	Date of Receipt M M J D D J 2012 Transaction ID: 1A5DEEA5166C6C693D7 Amount of Each Receipt this Period 600.00
Full Name (Last, First, Middle Initial) Lloyd Hoffman MD Mailing Address 12A E 68th St City New York FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary General Other (specify)	State Zip Code NY 10065-5855 C Occupation Physician Aggregate Year-to-Date ▼ 365.00	Date of Receipt M M M
Full Name (Last, First, Middle Initial) William H. Huffaker MD Mailing Address 17300 N Outer 40 Rd Ste 300 City Wildwood FEC ID number of contributing federal political committee. Name of Employer St. Louis Cosmetic Surgery Receipt For: Primary General Other (specify)	State Zip Code MO 63005-1364 C Occupation Physician Aggregate Year-to-Date ▼ 2000.00	Date of Receipt M
SUBTOTAL of Receipts This Page (optional)		2965.00
TOTAL This Period (last page this line number	only)	

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	and Statements may not be sold or used by any per g the name and address of any political committee	
NAME OF COMMITTEE (In Full) American Society of Plastic	Surgeons PLASTYPAC	
Full Name (Last, First, Middle Initial) Elliot W. Jacobs MD Mailing Address 815 Park Ave City New York FEC ID number of contributing federal political committee. Name of Employer Self Receipt For: Primary Other (specify)	State Zip Code NY 10021-3295 C Occupation Physician Aggregate Year-to-Date ▼ 250.00	Date of Receipt 06 15 2012 Transaction ID: 891151013AFB75B437B Amount of Each Receipt this Period 250.00
Full Name (Last, First, Middle Initial) Debra J. Johnson MD Mailing Address 95 Scripps Dr City Sacramento FEC ID number of contributing federal political committee. Name of Employer The Plastic Surgery Center Receipt For: Primary General Other (specify) Other (specify)	State Zip Code CA 95825-6320 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	Date of Receipt 05 18 2012 Transaction ID: 4FE7B1D82C8989D9FA35 Amount of Each Receipt this Period 100.00
Full Name (Last, First, Middle Initial) Debra J. Johnson MD Mailing Address 95 Scripps Dr City Sacramento FEC ID number of contributing federal political committee. Name of Employer The Plastic Surgery Center Receipt For: Primary General Other (specify)	State Zip Code CA 95825-6320 C Occupation Physician Aggregate Year-to-Date ▼ 300.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (options	al)	450.00
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Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	
NAME OF COMMITTEE (In Full) American Society of Plastic Sur	geons PLASTYPAC	
Full Name (Last, First, Middle Initial) Dean L. Johnston MD Meiling Address 4400 W. John Mars Rock		Date of Receipt
Mailing Address 4106 W Lake Mary Blvd		04 / 0 0 / Y 1 Y 1 Y 1 Y
Ste 212 City	State Zip Code	04 26 2012 Transaction ID : ACE293EB-9D8D-490B-
Lake Mary	FL 32746-3344	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	300.00
Name of Employer	Occupation	
Dean L Johnston MD, Inc.	Practice Manager	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Dean L. Johnston MD		Date of Receipt
Mailing Address 4106 W Lake Mary Blvd		M M / D D / Y Y Y Y
Ste 212 City	State Zip Code	05 24 2012
Lake Mary	FL 32746-3344	Transaction ID : FED489E8-AAF3-429C- Amount of Each Receipt this Period
FEC ID number of contributing		Amount of East Hoospt this Foriou
federal political committee.	C	300.00
Name of Employer	Occupation	
Dean L Johnston MD, Inc.	Practice Manager	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
Full Name (Last, First, Middle Initial) Loree K. Kalliainen MD		Date of Receipt
Mailing Address 640 Jackson St		
Mail Stop 11503 B		06 05 2012
City	State Zip Code	Transaction ID : 1550963F-D002-4CB2-
Saint Paul	MN 55101-2502	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Regions Hospital Plastic/Hand Surgery	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)	·····	1100.00
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		statements may not be sold or used by any person e name and address of any political committee to	
	NAME OF COMMITTEE (In Full) American Society of Plastic Sur	geons PLASTYPAC	
A.	Full Name (Last, First, Middle Initial) Geoffrey R. Keyes MD Mailing Address 9201 W Sunset Blvd		Date of Receipt
	Ste 611		06 22 2012
	City	State Zip Code	Transaction ID: 845243F9D7BC343DAB0
	Los Angeles	CA 90069-3707	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer	Occupation	
	Self	Physician	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
В.	Full Name (Last, First, Middle Initial) Sami U. Khan MD Mailing Address Room 60, Hsc T-19		Date of Receipt
	Suny-Stony Brook University	Medica	06 15 _ 2012 _
	City	State Zip Code	Transaction ID : F74244C2-AC34-4980-
	Stony Brook	NY 11794-8191	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	300.00
	Name of Employer Division of Plastic Surgery	Occupation Physician	
	Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	
_	Full Name (Last, First, Middle Initial)		
	Sugene Kim MD		Date of Receipt
	Mailing Address 4185 Technology Forest Blvd Ste 150 City	State Zip Code	05 03 2012
	Spring	TX 77381-2005	Transaction ID: 63FB5BA855D46FA7890 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	600.00
	Name of Employer	Occupation	
	Self	Physician	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	600.00	
Н	UBTOTAL of Receipts This Page (optional) DTAL This Period (last page this line number	<u> </u>	1200.00

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) Robert M. Kimmel MD Date of Receipt Mailing Address 575 E Norwegian St Keystone Surgery Center 06 2012 City Zip Code State Transaction ID: C5E2F8C7118E8D35F3D PΑ Pottsville 17901-3711 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Keystone Cosmetic Surgery Center Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Neil Elliot Klein MD Date of Receipt Mailing Address 11480 Brookshire Ave Ste 306 06 06 2012 City State Zip Code Transaction ID: 4F456DE06017032244A CA Downey 90241-5024 Amount of Each Receipt this Period FEC ID number of contributing 300.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) Full Name (Last, First, Middle Initial) c. Carl W. Lentz MD Date of Receipt Mailing Address 1040 W International Speedway Blvd 20 05 2012 State Zip Code Transaction ID: CEC6099E-A22C-4B9A-FL Daytona Beach 32114-3434 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 С federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) 1550.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	ne name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Society of Plastic Su	urgeons PLASTYPAC	
Full Name (Last, First, Middle Initial) 4. James T. Lin MD		Date of Receipt
Mailing Address 8021 Laguna Blvd Ste 3		06 08 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : B3290928-A76B-416D-
Elk Grove	CA 95758-7920	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Self	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) 3. Paul W. Loewenstein MD		Date of Receipt
Mailing Address 13800 W North Ave Ste 110		05 03 2012
City	State Zip Code	Transaction ID : 166E82BAB1C956DC1E7
Brookfield	WI 53005-4977	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	450.00
Name of Employer	Occupation	
Self	Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) C. Raman Chaos Mahabir MD		Date of Receipt
Mailing Address Division of Plastic Surgery		04 04 2012
City	State Zip Code	Transaction ID : BA20128E-E0E3-4574-
Temple	TX 76508-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Self	Assistant Professor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		1950.00
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NAME OF COMMITTEE (In Full) American Society of Plastic Sui	geons PLASTYPAC	
Full Name (Last, First, Middle Initial) Marcel M. Malek MD Mailing Address, 8438 F. Shea Rlyd		Date of Receipt
Mailing Address 8438 E Shea Blvd Ste 101		06 22 _ 2012 _
City	State Zip Code	Transaction ID : 52B2042775200CA8DC1
Scottsdale	AZ 85260-6669	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	600.00
Name of Employer	Occupation	
Self	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) Marshall G. Miles DO		Date of Receipt
Mailing Address 1243 S Cedar Crest Blvd Ste 301		06 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID : F588001A-4E33-4C13-
Allentown	PA 18103-6268	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Self	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) C. Michael J. Miller MD		Date of Receipt
Mailing Address 915 Olentangy River Rd Ste 2100		04 06 / 2012
City	State Zip Code	Transaction ID: 01129861CB47F80739B
Columbus	OH 43212-3154	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Ohio State University	Professor and Chief	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
SUBTOTAL of Receipts This Page (optional)	•	1100.00
TOTAL This Period (last page this line number	only)	

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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) J. Michael Morrissey MD Date of Receipt Mailing Address 221 W Colorado Blvd Ste 727 2012 27 City State Zip Code Transaction ID: 1AC6019D-B421-43E1-TX 75208-2308 Dallas Amount of Each Receipt this Period FEC ID number of contributing 400.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) Full Name (Last, First, Middle Initial) B. Robert X. Murphy Jr., MD Date of Receipt Mailing Address 2597 Schoenersville Rd Ste 305 17 04 2012 City State Zip Code Transaction ID: 942ED342-22A4-4644 PA Bethlehem 18017-7331 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Cosmetic and Reconstructive Specialist Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) C. Herbert J. Nassour MD Date of Receipt Mailing Address 1300 Murchison Dr 04 26 2012 Ste 300 City Zip Code State Transaction ID: 9A83811932A8C942F71 TX El Paso 79902-4851 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1150.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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	13 14 15 16	17

	Statements may not be sold or used by any persite name and address of any political committee to	
NAME OF COMMITTEE (In Full)		
American Society of Plastic Su	rgeons PLASTYPAC	
Full Name (Last, First, Middle Initial) A. Anne M. Nickodem MD		Date of Receipt
Mailing Address 3301 Woodburn Rd Ste 201		05 18 2012
City	State Zip Code	Transaction ID : E949AFD9-BEE4-44C2-
Annandale	VA 22003-6899	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer	Occupation	†
Self	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Phillip H. Nunnery MD		Date of Receipt
Mailing Address 1936 Jenks Ave		M = M / D = D / Y = Y = Y
Ste A	State 7'- O	05 10 2012
City	State Zip Code	Transaction ID : D579B460CDE47749B71
Panama City	FL 32405-4528	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	
Self	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) C. Alfonso Oliva MD		Date of Receipt
Mailing Address 530 S Cowley St		05 30 2012
City	State Zip Code	Transaction ID : 51CB8BD6-1F13-4C0E-
Spokane	WA 99202-1316	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	1
Self	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	Aggrogato real-to-Date ▼	
Other (specify) ▼	250.00	
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for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) Charles W. Perry MD Date of Receipt Mailing Address 3800 J St Ste 210 30 2012 City State Zip Code Transaction ID: A85F65C8-3BCF-400C-CA Sacramento 95816-5551 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Byron D. Poindexter MD Date of Receipt Mailing Address 1825 Samuel Morse Dr 05 30 2012 City State Zip Code Transaction ID: 55052F78481009E5B0C VA Reston 20190-5317 Amount of Each Receipt this Period FEC ID number of contributing 500.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name (Last, First, Middle Initial) c. Lori G. Polacek MD Date of Receipt Mailing Address 1524 Atwood Ave 28 2012 Ste 343 City State Zip Code Transaction ID: 3F2D6709E06181912DE RΙ **Johnston** 02919-3228 Amount of Each Receipt this Period FEC ID number of contributing 300.00 С federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 300.00 Other (specify) 1050.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) Christian A. Prada MD Date of Receipt Mailing Address 17300 N Outer 40 Rd Ste 300 2012 24 City Zip Code State Transaction ID: 513CE324-6A2A-40F4-MO Chesterfield 63005-1364 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation St. Louis Cosmetic Surgery Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Randy D. Proffitt MD Date of Receipt Mailing Address 6317 Piccadilly Square Dr 05 30 2012 City State Zip Code Transaction ID: 3DD83508-1244-417E-ΑL Mobile 36609-5103 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) c. Vasdev S. Rai MD Date of Receipt Mailing Address 7777 Forest Ln 27 2012 Ste C612 City State Zip Code Transaction ID: 136A3677-B514-4AEA-TX **Dallas** 75230-6853 Amount of Each Receipt this Period FEC ID number of contributing 400.00 С federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 400.00 Other (specify) 1015.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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		13		14		15		16	;		17

	Statements may not be sold or used by any person ename and address of any political committee to	
NAME OF COMMITTEE (In Full) American Society of Plastic Sur	geons PLASTYPAC	
Full Name (Last, First, Middle Initial) Adam G. Ravin MD		Date of Receipt
Mailing Address 200 Medical Park Dr Ste 320		M = M / D = D / Y = Y = Y = Y
City	State Zip Code	05 29 2012 Transaction ID: 205E9475-904E-46E0-
Concord	NC 28025-0936	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Self	Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Ronald G. Ritz MD		Date of Receipt
Mailing Address 575 Rivergate		M = M / D = D / Y = Y = Y
Unit 205 City	State Zip Code	04 20 2012
Durango	CO 81301-7490	Transaction ID : 6D39A396-FB5B-4AC4- Amount of Each Receipt this Period
FEC ID number of contributing		
federal political committee.	[C]	250.00
Name of Employer	Occupation	
Self	Physician	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) C. Malcolm Z. Roth MD		Date of Receipt
Mailing Address 43 New Scotland Ave Mail Code 190		04 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Albany	State Zip Code NY 12208-3412	Transaction ID: B77E57BC-7A33-42E6- Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Albany Medical Center	Associate Professor	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		1750.00
TOTAL This Period (last page this line number	only)	

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for each category of the Detailed Summary Page	X 11a 11b	11c 12
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	Statements may not be sold or used by any pers he name and address of any political committee to	
NAME OF COMMITTEE (In Full) American Society of Plastic Su	urgeons PLASTYPAC	
Full Name (Last, First, Middle Initial) Ernesto J. Ruas MD Mailing Address, 603 S Reulevard		Date of Receipt
Mailing Address 603 S Boulevard		06 15 2012
City	State Zip Code	Transaction ID : D14B1804A19CD495BE6
Tampa	FL 33606-2629	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Self	Physician	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Vasif N. Sabeeh DO		Date of Receipt
Mailing Address 14256 N Northsight Blvd Ste 120	7. 0. 1	06 22 2012
City Scottsdale	State Zip Code AZ 85260-3954	Transaction ID : 1DE73296-E9B4-498B-
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 365.00
Name of Employer Arizona Plastic & Reconstructive Surge	Occupation Managing Member	
Receipt For: Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	
Full Name (Last, First, Middle Initial) C. Loren S. Schechter MD	•	Date of Receipt
Mailing Address 9000 Waukegan Rd Ste 210		05 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Morton Grove	State Zip Code IL 60053-2127	Transaction ID: 4D6963ED-4768-4F32- Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	_
Self	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
SUBTOTAL of Receipts This Page (optional)		1115.00
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FOR LINE NUMBER: PAGE 28 OF 44 Use separate schedule(s) (check only one) X 11a 11b 12 11c

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) Benjamin Schlechter MD Date of Receipt Mailing Address 2603 Keiser Blvd Ste 207 2012 21 City State Zip Code Transaction ID: 318FE762-9AFB-46CE-PΑ Wyomissing 19610-3341 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 1000.00 Other (specify) Full Name (Last, First, Middle Initial) B. Ronald H. Schuster MD Date of Receipt Mailing Address 10807 Falls Rd Ste 101 06 06 2012 City State Zip Code Transaction ID: 11BBC6C4267E6A45B44 MD Lutherville 21093-4596 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) c. Robert J. Schutz MD Date of Receipt Mailing Address 3615 5th St 20 04 2012 Ste 101 City Zip Code State Transaction ID: 9BACE394-930D-4475-SD Rapid City 57701-7360 Amount of Each Receipt this Period FEC ID number of contributing 250.00 С federal political committee. Name of Employer Occupation Black Hills Plastic Surgery Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 1500.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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for each category of the Detailed Summary Page 14 13 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) Bharat Shah MD Date of Receipt Mailing Address Plastic Surgery, Suite 340 06 2012 City Zip Code State Transaction ID: 2E9D56DD-7AEC-4CF9-MO Springfield 65804 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation St. John's Clinic Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) B. Subramanya R. Shastri MD Date of Receipt Mailing Address 17 Limestone Dr Ste 1 06 26 2012 City State Zip Code Transaction ID: 1D8588FDE96C46D772D Williamsville NY 14221-8601 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) c. Robert K. Sigal MD Date of Receipt Mailing Address 1825 Samuel Morse Dr 30 2012 City Zip Code State Transaction ID: 7AE57EAFFCA04E0F471 Reston VA 20190-5317 Amount of Each Receipt this Period FEC ID number of contributing 500.00 С federal political committee. Name of Employer Occupation Medical Director Self Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) 1230.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (In Full)	. , , ,	
American Society of Plastic Sur	geons PLASTYPAC	
,	<u> </u>	
Full Name (Last, First, Middle Initial) A. Gary A. Smotrich MD		Date of Receipt
Mailing Address 3131 Princeton Pike		M = M / D = D / Y = Y = Y
Bldg 5		05 30 2012
City	State Zip Code	Transaction ID: 8319598E-82E3-49FC-
Lawrenceville	NJ 08648-2201	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer	Occupation	
Lawrenceville Plastic Surgery	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	00 0	
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) David R. Stephens MD		Date of Receipt
Mailing Address 10687 NE 2nd St		M = M / D = D / Y = Y = Y
City	Chata 7'- Ca l	06 06 2012
City	State Zip Code	Transaction ID : BF36B8F6E683F1B099D
Bellevue	WA 98004-5727	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer	Occupation	
Self	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	55 0	
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) C. Anne Taylor MD		Date of Receipt
Mailing Address 2 Easton Oval		M = M / D = D / Y = Y = Y
Ste 545		04 25 2012
City	State Zip Code	Transaction ID : AECF3F46-079F-4D54-
Columbus	OH 43219-8032	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	2000.00
Name of Employer	Occupation	
Ohio State University - Plastic Surger	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
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Other (specify) ▼	2000.00	
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SCHEDULE A (FEC Form 3X) IT

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A or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) Scott L. Tucker MD Date of Receipt Mailing Address 1345 Westgate Center Dr Ste A 2012 27 City State Zip Code Transaction ID: E6BC0172-A8D6-45A0-NC Winston Salem 27103-3041 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name (Last, First, Middle Initial) B. Bruce W. Van Natta MD Date of Receipt Mailing Address 170 W 106th St 06 22 2012 City State Zip Code Transaction ID: 1DDAA96F-739B-4358-Indianapolis IN 46290-1004 Amount of Each Receipt this Period FEC ID number of contributing 365.00 federal political committee. Name of Employer Occupation Self Physician Receipt For: Aggregate Year-to-Date ▼ Primary General 365.00 Other (specify) Full Name (Last, First, Middle Initial) c. Charles N. Verheyden MD Date of Receipt Mailing Address 2401 S 31st St 20 2012 04 City State Zip Code Transaction ID: C2D39AF960DAB49ECA1 TX Temple 76508-0001 Amount of Each Receipt this Period FEC ID number of contributing C 1000.00 federal political committee. Name of Employer Occupation Physician Scott & White Clinic

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Receipt For:

Primary

Other (specify)

General

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NAME OF COMMITTEE (In Full)		
American Society of Plastic Sui	rgeons PLASTYPAC	
Full Name (Last, First, Middle Initial) Jerome S. Weiskopf MD		Date of Receipt
Mailing Address 6533 Lexus Dr		04 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 772A7782D8BFC53BD41
Rockford	IL 61108-3015	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer	Occupation	
Self	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Virgil V. Willard MD		Date of Receipt
Mailing Address 1011 N Lindsay St		M = M / D = D / Y = Y = Y
Ste 202		04 26 2012
City	State Zip Code	Transaction ID: 8B185995-540C-4A59-
High Point	NC 27262-3945	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	250.00
Name of Employer	Occupation	
Self	Physician	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General		
Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) C. Robert Zubowski MD		Date of Receipt
Mailing Address 1 Sears Dr		06 27 2012
City	State Zip Code	Transaction ID : E0140EFF-4B1D-4CC2-
Paramus	NJ 07652-3515	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	600.00
Name of Employer	Occupation	
Self	Physician	
Receipt For:	,	1
Primary General	Aggregate Year-to-Date ▼	
Other (specify)	600.00	
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<u> </u>	NAME OF COMMITTEE (In Full)									-			
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/	American Society of Plastic Surged	ons PLASTYPAC											
_	Full Name (Last, First, Middle Initial)												
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Λ.	American Express						_						
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	Mailing Address FO Box 53632					04	-	Ū.	5	<u>_</u>	2012		
	City	State Zip Code											
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	President	Other (specify)											
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	City	State Zip Code											
	Phoenix	AZ 85072				Irans	sact	ion ID	: V1E	D48CI	30010	JCA3	AB12
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	AmEx Fees		Ш.	001		Amoun	t of	Each	Disbur	seme	nt this	Perio	od
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SCHEDULE B (FEC Form 3X)		FOR LINE	OR LINE NUMBER: PAGE 34 C		
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NAME OF COMMITTEE (In Full)					
American Society of Plastic Surge	ons PLASTYPAC				
Full Name (Last, First, Middle Initial)			Data of Dialaman		
A. JP Morgan Chase			Date of Disbursemen		
Mailing Address 1201 South Milwaukee Ave			04 03	2012	
City	State Zip Code		Transaction ID : 45	5E20AB0F2D0FF3044	
Libertyville	IL 60048		Transaction ID . 45	3E2UABUF2DUFF3U44	
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President	Other (specify)				
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Full Name (Last, First, Middle Initial)					
B. JP Morgan Chase			Date of Disbursemen		
Mailing Address 1201 South Milwaukee Ave			04 12	2012	
City	State Zip Code				
Libertyville	IL 60048		Transaction ID: 12	E521EBE94529949A7	
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President	Other (specify) ▼				
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Full Name (Last, First, Middle Initial) C. JP Morgan Chase			Date of Disbursemen	t	
or or worgan chase			M M / D D	/	
Mailing Address 1201 South Milwaukee Ave			05 02	2012	
City	State Zip Code		Transaction ID : 17	CE4BE7BDC4C94AC72	
Libertyville Purpose of Disbursement	IL 60048				
Bank Fees		001	Amount of Each Dish	oursement this Period	
Candidate Name		Category/ Type		174.68	
Office Sought: House Disburs	ement For:				
Senate	Primary General				
President	Other (specify) ▼				
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Any information copled from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. ANME OF COMMITTEE (In Full) AMERICAL STRIP (In Middle Initial) A JP Morgan Chase Mailing Address 1201 South Milwaukse Ave City State Zip Code IL 60048 Purpose of Disbursement Bank Foss Crity State Zip Code Purpose of Disbursement State: District: State: Disbursement State: District: Full Name (Last, First, Middle Initial) Amount of Each Disbursement this Period Crity State Zip Code Purpose of Disbursement Category/ Type Office Sought: House Disbursement For: Full Name (Last, First, Middle Initial) Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Full Name (Last, First, Middle Initial) Crity State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Full Name (Last, First, Middle Initial) Crity State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Crity State Zip Code Purpose of Disbursement State: Disbursement Cardidate Name Category/ Type Office Sought: House Disbursement For: Cardidate Name Category/ Type Office Sought: House Disbursement For: Cardidate Name Category/ Type Office Sought: House Disbursement For: Cardidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Primary General Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Cardidate Name Category/ Type Date of Disbursement this Period Category/ Type Amount of Each Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type District: State: District: Name Category/ Type District: Name Category/ Type District: Name Category/ Type District: Name Category/ Type						
or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in Full) American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) J P Morgan Chase Mailing Address 1201 South Milwaukee Ave City State Zp Code Libertyville IL 60048 Purpose of Disbursement Bank Foes Candidate Name Office Sought: House President Category/ Type Office Sought: House Disbursement For: Senate President Other (specify) ▼ State: District Full Name (Last, First, Middle Initial) Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: Category/ Type Office Sought: House Disbursement For: Senate President Other (specify) ▼ State: District Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Office Sought: House Disbursement For: Candidate Name Office Sought: House Disbursement For: State: District Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Office Sought: House Disbursement For: Senate President Other (specify) ▼ State: Disbursement For: Senate Primary General Pr						
American Society of Plastic Surgeons PLASTYPAC Full Name (Last, First, Middle Initial) JP Morgan Chase Mailing Address City State District: Full Name (Last, First, Middle Initial) State: District: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Other (specify) Amount of Each Disbursement this Period Category/ Type Other (specify) Amount of Each Disbursement this Period Category/ Type Date of Disbursement this Period Category/ Type State: District: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type State: District: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type State: District: State: District: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Amount of Each Disbursement this Period Category/ Type State: District: State: District: State: District: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Amount of Each Disbursement this Period Category/ Type State: District: State: District: State: District: Full Name (Last, First, Middle Initial) Date of Disbursement this Period Category/ Type Category/ Type Amount of Each Disbursement this Period Category/ Type Category/ Type District: State: District:						
Tull Name (Last, First, Middle Initial) A JP Morgan Chase Mailing Address 1201 South Milwaukee Ave City State Zip Code IL 60048 Purpose of Disbursement Bank Fees Candidate Name Office Sought: House Prissident Disbursement State: District: Full Name (Last, First, Middle Initial) Amount of Each Disbursement this Period Category Type Office Sought: House Prissident Primary General Other (specify) ▼ Mailing Address City State Zip Code Purpose of Disbursement Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category Type Date of Disbursement this Period Amount of Each Disbursement this Period Category Type Date of Disbursement Amount of Each Disbursement this Period Category Type Office Sought: House Senate Primary General Pr						
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Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Category/ Type Date of Disbursement Amount of Each Disbursement this Period Category/ Type Amount of Each Disbursement Date of Disbursement Amount of Each Disbursement Amount of Each Disbursement Other (specify) ▼ Suppose the primary General Other (specify) ▼	City	State Zip Code				
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Office Sought: House Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Candidate Name Disbursement For: Category/ Type Office Sought: House Primary General Other (specify) Senate Primary General Other (specify) State: District: Suppose of Disbursement For: Senate Primary General Other (specify) State: District:	Candidate Name			Amount of Each I	Disbursement this Period	
Senate Primary General Other (specify) Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Disbursement For: Senate Primary General Other (specify) State: District: Substortal of Disbursements This Page (optional)						
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State: District: Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Candidate Name Office Sought: House Senate Primary General Other (specify) State: District: Subtrotal of Disbursements This Page (optional)						
Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ State: District: Substitute Of Disbursements This Page (optional)		Other (specify)				
Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Primary General Other (specify) ▼ Subtrotal of Disbursements This Page (optional)	,					
City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Primary General Other (specify) ▼ Subtotal of Disbursements This Page (optional)	C.					
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) State: District: Substruct: Amount of Each Disbursement this Period Category/ Type Amount of Each Disbursement this Period Category/ Type 215.98	Mailing Address			M M / D	D / Y Y Y Y	
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District: Subtrotal of Disbursements This Page (optional)	City	State Zip Code				
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ SUBTOTAL of Disbursements This Page (optional)	Purpose of Disbursement					
Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Subtrotal of Disbursements This Page (optional)	Candidate Name		Category/	Amount of Each I	Disbursement this Period	
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	PAGE 36 OF 44	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b	22 X 23 28b	24 25 26 28c 29 30l
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam-				
NAME OF COMMITTEE (In Full) American Society of Plastic Surgeo				om odon odnimilaco.
Full Name (Last, First, Middle Initial)			5 . (5)	
A. Andy Harris for Congress			Date of Disburseme	
Mailing Address PO Box 604			04 18	2012
,	State Zip Code		Transaction ID : 9	94A713D3E52FD245B3E
Bel Air Purpose of Disbursement	MD 21014			
2012 General		011	Amount of Each Di	sbursement this Period
Candidate Name		Category/		2000.00
Andrew P. Harris	1.5	Туре		2000.00
Senate	nent For: 2012 Primary General Other (specify)			
Full Name (Last, First, Middle Initial)				
B. Benishek for Congress, Inc.			Date of Disburseme	ent
Mailing Address PO Box 108			04 18	2012
Gladstone	State Zip Code MI 49837		Transaction ID : 2	2A45EF44D9636EE0435
Purpose of Disbursement 2012 General		011	Amount of Each Di	sbursement this Period
Candidate Name		Category/		2000.00
Daniel J. Benishek		Type		2000.00
Senate	nent For: 2012 Primary			
Full Name (Last, First, Middle Initial) C. Bill Cassidy for Congress			Date of Disburseme	_
Mailing Address PO Box 80505			04 / 18	2012
Baton Rouge	State Zip Code LA 70898		Transaction ID :	56836752399F56A9D2B
Purpose of Disbursement 2012 General		011	Amount of Each Di	sbursement this Period
Candidate Name William Cassidy		Category/ Type		2000.00
Senate	nent For: 2012 Primary General Other (specify)			
SUBTOTAL of Disbursements This Page (optional)				6000.00
TOTAL This Period (last page this line number only).			7	

SCHEDULE B (FEC Form 3X)	Use separate schedule(s	FOR LINE	INDIVIDEIT.	37 OF 44
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 24 28c 28c	25 26 29 30
Any information copied from such Reports and State or for commercial purposes, other than using the nar				
NAME OF COMMITTEE (In Full) American Society of Plastic Surger		icai committee to	Solicit Contributions from Such C	ommuee.
Full Name (Last, First, Middle Initial)				
A. Bucshon for Congress			Date of Disbursement	
Mailing Address PO Box 250				2012
City	State Zip Code		T	70F004FD740
Newburgh	IN 47629		Transaction ID : 6BF7598E7	/3FC61ED/42
Purpose of Disbursement 2012 General		011	Amount of Each Disbursemen	t this Period
Candidate Name Larry D. Bucshon		Category/ Type		2000.00
	ment For: 2012 Primary	Турс		
Full Name (Last, First, Middle Initial) B. Capuano for Congress Committee			Date of Disbursement	/
Mailing Address PO Box 440305			04 18 2	2012
Somerville	State Zip Code MA 02144		Transaction ID: 73B4A94A	FA8AE7A6A9
Purpose of Disbursement 2012 General		011	Amount of Each Disbursemen	t this Period
Candidate Name		Category/		2000.00
Michael Everett Capuano Office Sought: House Disburse	ment Ferr 2010	Туре	, , , , , , , , , , , , , , , , , , , ,	2000.00
Office Sought: House Disburse Senate President State: MA District: 08	ment For: 2012 Primary			
Full Name (Last, First, Middle Initial) C. Castor for Congress			Date of Disbursement	
Mailing Address 301 W Platt Street, #385				2012
Tampa	State Zip Code FL 33606		Transaction ID : 3BCB51B8	42C42DFF61I
Purpose of Disbursement 2012 General		011	Amount of Each Disbursemen	t this Period
Candidate Name Katherine Anne Castor		Category/		2000.00
Office Sought: House Senate President Disburse	ment For: 2012 Primary	Туре		
State: FL District: 14 SUBTOTAL of Disbursements This Page (optional)		>		6000.00
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X)		FOR LINE	NUMBER: PAGE 38 OF 44
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
	Detailed Summary Page	21b	22 X 23 24 25 26 28a 28b 28c 29 30b
		27	
Any information copied from such Reports and State or for commercial purposes, other than using the I			
NAME OF COMMITTEE (In Full)			
American Society of Plastic Surg	eons PLASTYPAC		
Full Name (Last, First, Middle Initial)			
A. Charles Boustany Jr. Md for Con	gress, Inc.		Date of Disbursement
Mailing Address PO Box 80126			04 18 2012
City	State Zip Code		Transaction ID: B70CFDCD3C7789F8943
Lafayette Purpose of Disbursement	LA 70598		
2012 General		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2000.00
Charles W. Boustany Jr.		Type	2000.00
Office Sought: House Disbur	sement For: 2012 Primary		
State: LA District: 07			
Full Name (Last, First, Middle Initial)			
B. Charlie Dent for Congress			Date of Disbursement
Mailing Address PO Box 442			04 18 2012
City Allentown	State Zip Code PA 18105		Transaction ID : 2220918178E4FC6FF29
Purpose of Disbursement 2012 General		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2222.22
Charles W. Dent		Type	2000.00
Office Sought: House Disbur	sement For: 2012 Primary		
Full Name (Last, First, Middle Initial)			
c. Dave Camp for Congress			Date of Disbursement
Mailing Address 5915 Eastman Avenue Suite 100			04 18 2012
City Midland	State Zip Code MI 48640		Transaction ID : 7DA453F299978C8E2CD
Purpose of Disbursement 2012 General		011	Amount of Fook Diskursons at this Davied
Candidate Name			Amount of Each Disbursement this Period
Dave Camp		Category/ Type	5000.00
Senate President	sement For: 2012 Primary		
State: MI District: 04			
SUBTOTAL of Disbursements This Page (optional	1)	<u> </u>	9000.00
TOTAL This Period (last page this line number of	าly)		

SCHEDULE B (FEC Form 3X)	llea congrato cabadula(a)	FOR LINE	
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	7 one) 22 X 23 24 25 26 28a 28b 28c 29 30b
Any information copied from such Reports and State or for commercial purposes, other than using the			
NAME OF COMMITTEE (In Full)			
American Society of Plastic Surg	eons PLASTYPAC		
Full Name (Last, First, Middle Initial)			
A. David Scott for Congress			Date of Disbursement
Mailing Address PO Box 960821			04 18 2012
City	State Zip Code		Transaction ID : B054953FC5D9A3DF7FA
Riverdale	GA 30296		Transaction 12 1 200 10001 0020/1021 11 /1
Purpose of Disbursement 2012 General		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2000.00
David Albert Scott		Туре	200.00
Office Sought: House Disbur Senate President	sement For: 2012 Primary		
State: GA District: 13			
Full Name (Last, First, Middle Initial)			
B. Diane Black for Congress			Date of Disbursement
Mailing Address PO Box 1437			04 18 2012
City Gallatin	State Zip Code TN 37066		Transaction ID : D11D1A721280B45F2AB
Purpose of Disbursement 2012 General		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2000.00
Diane Black		Туре	2000.00
Office Sought: House Disbur	sement For: 2012 Primary		
Full Name (Last, First, Middle Initial) C. Friends of Carolyn McCarthy			Date of Disbursement
Mailing Address 151 Linden Road			06 20 2012
City	State Zip Code		Transaction ID : AD9C12B1F4839AB8E2A
Mineola Purpose of Disbursement	NY 11501		
2012 General		011	Amount of Each Disbursement this Period
Candidate Name		Category/	2002.00
Carolyn McCarthy		Type	2000.00
Office Sought: House Disbur Senate President	sement For: 2012 Primary General Other (specify) ▼		
State: NY District: 04			
SUBTOTAL of Disbursements This Page (optional	I)	·····•	6000.00
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SCHEDULE B (FEC Form 3X)	Llea caparata cabadula(c)	FOR LINE NUMBER: PAGE 40 OF 44			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 24 25 2 28a 28b 28c 29 3		
Any information copied from such Reports and State or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full) American Society of Plastic Surge	ons PLASTYPAC				
Full Name (Last, First, Middle Initial)					
A. Friends of Nan Hayworth			Date of Disbursement		
Mailing Address PO Box 188			04 18 2012		
City	State Zip Code		Transaction ID : B2F9BC89066DAB7673		
Carmel Purpose of Disbursement	NY 10512				
2012 General		011	Amount of Each Disbursement this Period		
Candidate Name		Category/	2000.00		
Nan Alison Sutter Hayworth		Type	2000.00		
Office Sought: House Disburse Senate President	ment For: 2012 Primary				
State: NY District: 19					
B. Gingrey for Congress, Inc.			Date of Disbursement		
Mailing Address PO Box U			04 18 2012		
City Marietta	State Zip Code GA 30060		Transaction ID : 42BCC88C9AF21E097B		
Purpose of Disbursement 2012 General		011	Amount of Each Disbursement this Period		
Candidate Name Phil Gingrey		Category/ Type	3000.00		
	ment For: 2012 Primary	71			
Full Name (Last, First, Middle Initial) C. Hatch Election Committee Inc			Date of Disbursement		
Mailing Address PO Box 900427			04 18 2012		
City Sandy Purpose of Disbursement	State Zip Code UT 84090		Transaction ID : BABD3A7F1AFCCC54B		
2012 Primary Candidate Name		011	Amount of Each Disbursement this Period		
Orrin G. Hatch		Category/ Type	5000.00		
Office Sought: House Senate President Disburse	ment For: 2012 Primary General Other (specify)	.,,,,,			
State: UT District:					
SUBTOTAL of Disbursements This Page (optional).		·····	10000.00		
TOTAL This Period (last page this line number only	·)				

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 41 OF 44 (check only one)			
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b	22 X 23 28b	24 25 26 28c 29 30	
Any information copied from such Reports and State or for commercial purposes, other than using the nar					
NAME OF COMMITTEE (In Full) American Society of Plastic Surger	· · · · · · · · · · · · · · · · · · ·		Solida Solida Maria II	c sast committee.	
Full Name (Last, First, Middle Initial)			5 . (5)		
A. John Sullivan for Congress, Inc			Date of Disburseme		
Mailing Address Post Office Box 470840			04 / 18	2012	
,	State Zip Code		Transaction ID : 4	174BEAFCD1E35279D95	
Tulsa Purpose of Disbursement	OK 74147		Transaction is .	HADEAI OD IEOOEI OD I	
2012 General		011	Amount of Each Di	sbursement this Period	
Candidate Name		Category/		2000.00	
John A. Sullivan		Type		2000.00	
Office Sought: House Disburse	ment For: 2012 Primary				
Full Name (Last, First, Middle Initial)					
B. Lance for Congress			Date of Disburseme		
Mailing Address PO Box 225			04 18	2012	
Colonia	State Zip Code NJ 07067		Transaction ID : (DA646B2A7D023624999	
Purpose of Disbursement 2012 General		011	Amount of Each Di	sbursement this Period	
Candidate Name		Category/			
Leonard Lance		Type		2000.00	
Office Sought: House Disburse	ment For: 2012 Primary General Other (specify)				
Full Name (Last, First, Middle Initial) C. Matheson for Congress			Date of Disburseme	_	
Mailing Address PO Box 521048			04 / 18	2012	
Salt Lake City	State Zip Code UT 84152		Transaction ID : 2	27323F7D89473C7DBB9	
Purpose of Disbursement 2012 General		011	Amount of Each Di	sbursement this Period	
Candidate Name		Category/	Amount of Each Br		
James David Matheson		Туре		3000.00	
Office Sought: House Senate President State: UT District: 04	ment For: 2012 Primary				
, , ,				7000.00	
SUBTOTAL of Disbursements This Page (optional)		<u> </u>		7000.00	
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SCHEDULE B (FEC Form 3X)	Llea caparata cabadula(c)	FOR LINE NUMBER: PAGE 42 OF 44			
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 24 25 26 28a 28b 28c 29 30b		
Any information copied from such Reports and State or for commercial purposes, other than using the na					
NAME OF COMMITTEE (In Full) American Society of Plastic Surge	ons PLASTYPAC				
Full Name (Last, First, Middle Initial)					
A. Pete Sessions for Congress			Date of Disbursement		
Mailing Address PO Box 823047			04 18 2012		
City	State Zip Code		Transaction ID : DE1F91A9D9F0030008D		
Dallas	TX 75382		Transaction is . SET STASSS 0030000		
Purpose of Disbursement 2012 General		011	Amount of Each Disbursement this Period		
Candidate Name		Category/	2000.00		
Peter Anderson Sessions		Туре			
Senate President	ement For: 2012 Primary				
State: TX District: 32					
Full Name (Last, First, Middle Initial)			Date of Disbursement		
B. Price for Congress			M M / D D / Y Y Y Y		
Mailing Address PO Box 425			04 18 2012		
City Roswell	State Zip Code GA 30077		Transaction ID: 9E6B5241FF5B782D0C0		
Purpose of Disbursement 2012 General		011	Amount of Each Disbursement this Period		
Candidate Name		Category/	2000.00		
Thomas E. Price M.D.		Type	2000.00		
Office Sought: House Disburse	ement For: 2012 Primary				
Full Name (Last, First, Middle Initial) C. Richard E Neal for Congress Com	nmittee		Date of Disbursement		
Mailing Address 76 Magnolia Terrace			04 18 2012		
City	State Zip Code		Transaction ID : 2A886AEAFE723127ED9		
Springfield Purpose of Disbursement	MA 01108				
2012 General		011	Amount of Each Disbursement this Period		
Candidate Name		Category/			
Richard Edmund Neal		Type	2000.00		
Senate President	ement For: 2012 Primary General Other (specify)				
State: MA District: 01					
SUBTOTAL of Disbursements This Page (optional)		·····•	6000.00		
TOTAL This Paried (last page this line number and	٨				
TOTAL This Period (last page this line number onl	y)				

SCHEDULE B (FEC Form 3X)	Lico concrete cobadula(a)	FOR LINE		PAGE 43 OF 44
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	(check only 21b 27	one) 22 X 23 28a 28b	24 25 26 28c 29 30b
Any information copied from such Reports and Staten or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full) American Society of Plastic Surged	•		Solidi Solidibutione in	on commutee.
Full Name (Last, First, Middle Initial)				
A. Ryan for Congress			Date of Disburseme	
Mailing Address PO Box 1488			04 18	2012
,	State Zip Code		Transaction ID: 0	BCF0D661377F6B6E26
Janesville Purpose of Disbursement	WI 53547			
2012 General		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/		2000.00
Paul Ryan Office Sought: ✓ House Disburser		Туре	7	2000.00
Senate President	nent For: 2012 Primary General Other (specify)			
State: WI District: 01				
Full Name (Last, First, Middle Initial) B. Scott Brown for Us Senate Commit	ttee Inc		Date of Disburseme	
Mailing Address 337 Summer Street			04 / 18	2012
Boston	State Zip Code MA 02210		Transaction ID: 3	359A10244C4EC17BA21
Purpose of Disbursement 2012 Primary		011	Amount of Each Dis	sbursement this Period
Candidate Name		Category/		0500.00
Scott Philip Brown		Type		2500.00
	nent For: 2012 Primary General Other (specify)			
Full Name (Last, First, Middle Initial) C. Scott Brown for Us Senate Commit	ttee Inc		Date of Disburseme	ent
Mailing Address 337 Summer Street			04 / 18	2012
Boston	State Zip Code MA 02210		Transaction ID: 9	98CEFC6A03773B177F
Purpose of Disbursement 2012 General		011	Amount of Each Dis	sbursement this Period
Candidate Name Scott Philip Brown		Category/	Amount of Each Dis	2500.00
•	nent For: 2012	Туре		
Senate President State: MA District:	Primary General Other (specify) ▼			
States IVIA DIGITION				
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ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE N (check only 21b 27	•
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full) American Society of Plastic Surgeo	e and address of any political		
Full Name (Last, First, Middle Initial) A. Stivers for Congress Mailing Address 4679 Winterset Drive			Date of Disbursement M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
,	otate Zip Code OH 43220		Transaction ID : C3E9C7D17606BFCCCC4
2012 General Candidate Name Steve Stivers Office Sought: House Senate Disbursem	nent For: 2012 Primary	011 Category/ Type	Amount of Each Disbursement this Period 1000.00
Full Name (Last, First, Middle Initial) B. Van Hollen for Congress Mailing Address 10537 St. Paul St.			Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Kensington Purpose of Disbursement 2012 General Candidate Name Chris Van Hollen Office Sought: House Senate Disbursem	itate Zip Code MD 20895 ment For: 2012 Primary General Other (specify) The code of the	011 Category/ Type	Transaction ID : D41CE8D22747195AD7E Amount of Each Disbursement this Period 1000.00
Full Name (Last, First, Middle Initial) C. Mailing Address			Date of Disbursement
City S Purpose of Disbursement Candidate Name	State Zip Code	Category/	Amount of Each Disbursement this Period
	nent For: Primary General Other (specify) ▼	Type	
SUBTOTAL of Disbursements This Page (optional) TOTAL This Period (last page this line number only).			2000.00